The MEDICAL MISSIONARY

The Christ Child

Vol. IV. AUGUST, 1931 No. 10

COMPULSORY SEGREGATION IMPRACTICABLE FOR 99 PERCENT OF THE WORLD'S LEPERS

By Sir Leonard Rogers, *C.I.E., F.R.S., I.M.S. (Retd.)*

IF COMPULSORY segregation had been proved to be an effective method of stamping out leprosy it would still be of very little use in solving the leprosy problem as a whole, for the simple reason that it is quite impossible to carry it out, for administrative and financial reasons, in the areas of the greatest number of cases in India, China, and tropical Africa. Over two decades ago, Dr. Heiser estimated the world's lepers at 2,000,000, at a time when the wide prevalence in Africa was not known. More recently, as the result of three years' study of the literature, I estimated them as not less than 3,000,000. Since then the leprosy surveys of Dr. Muir, in India, recently confirmed in British Guiana by Dr. Rose, showed that for each typical advanced case, such as alone are enumerated under the compulsory segregation system, there are anything from two to ten early cases in existence, so the world's lepers may very easily number 10,000,000. For the sake of my argument I will place the number at the very conservative estimate of 5,000,000.

I have made out a table of the numbers recorded as being segregated at the present time in the principal countries where that measure is in force, including the data in the valuable 1930 Report of the Secretary of the League of Nations Leprosy Commission; the number comes, in round numbers, to 35,000. To this may be added nearly 8,000 isolated in Indian leper asylums under a voluntary system, apart from a very few indigents, although many of them are old uninfective crippled nerve cases, whose isolation is only of humanitarian value, and does nothing to reduce leprosy infections, which will bring the number up to 43,000. The fullest allowance for small numbers isolated in other countries with comparatively few lepers could not make the total segregations under the old system over 50,000—just 1 percent of the world's lepers.—*Leprosy Review,* July, 1931.

THE SOCIETY OF CATHOLIC MEDICAL MISSIONARIES

The Society of Catholic Medical Missionaries is a religious community which was founded in September, 1925, with the approval of His Grace, Most Rev. Michael J. Curley, Archbishop of Baltimore.

The purpose of the Society is to work for the spread of our Holy Faith and to help the sick in foreign mission countries through the establishment of hospitals and dispensaries, medical schools, training schools for native nurses, infant welfare centers, plague camps, leper asylums and traveling dispensaries, and visiting the sick in their homes. Those who are desirous of devoting their lives to God in the service of the sick in the missions find ample scope for their generosity.

Three kinds of candidates are admitted: Those who are already professionally equipped as doctors, pharmacists, nurses, etc.

Young women who desire to take up medicine, pharmacy or nursing with the intention of devoting their profession to the care of the sick in the missions.

Those who have no medical training or do not wish to take up, but who are desirous of helping with the non-medical activities necessarily associated with the work, such as secretarial work, housekeeping, etc. There is scope for every talent.

Address all enquiries to Dr. Anna Dengel, Catholic Medical Mission House, Brookland, Washington, D. C.

Rustic Stations of the Cross in our Garden

THE FRONT COVER

The beautiful picture of the Christ Child on the front cover is a copy of a picture which is destined to be placed over a bed of a child in our hospital for women and children in India. The bed was endowed by a generous American benefactress.

The endowment of a bed is $1,200, which allows $72 for a year. Up to the present we have three beds endowed. This is a big help. We hope that more good samaritans will endow beds. It is a great and lasting charity.

The MEDICAL MISSIONARY

Published with ecclesiastical approbation ten times a year by the Society of Catholic Medical Missionaries, Inc., Brookland, Washington, D. C., in the interest of Medical Missions and Women of the Orient. Subscription, $1 per year.
Editor: Dr. Anna Dengel.

"Entered as second-class matter September 11, 1928, at the post office at Washington, D. C., under the Act of March 3, 1879."

THE JULY INTENTION OF THE APOSTLESHIP OF PRAYER*—MEDICAL MISSIONARIES

By JOANNA LYONS, *M.D.*

ONE of the delightful (there seems to be no other word for it) things about the Church is her perpetual youth, shown in an unceasing manifestation of new capabilities and new beauties. Unchanging as the rock, she is as fresh and full of stir and life as a fountain bathed in perpetual light. Growth within and without is the evidence of her life. There is nothing really new in her, but what in one age slumbered as a bud, in another is seen to be a branch which in its own time produces flowers and fruits.

After growth, the next great evidence of life is ability of adaptation to the environment. This note of life is marvellously displayed in every age of the history of the Church. The tender Mother, who seeks and cherishes her children with a divine love, never fails to be ready, with new methods and plans and expedients, to win and save and comfort them, as changing times and manners bring forth new problems.

So the different periods in the Church's history are marked by different spirits, by emphasis upon different aspects of the commands and counsels of Christ. Just now it would seem that the spread of the Gospel into every land and every class of society is the activity to which the Church, by the voice of her visible head, is particularly calling her children.

Month by month the League of the Sacred Heart unites in world-wide prayer for some particular part of the mission world, for some special phase of mission activity. This month we are praying for "Medical Missions," a department of mission work very little known to the average Catholic.

Just what is meant by medical missions? It is well to make a broad definition of them as any institution or activity which employs medical aid as a chief accessory means of spreading the charity of Christ for body and soul. There are all degrees of this aid. In every mission country the missionary finds that, willy-nilly, he must be somewhat of a physician and druggist. For instance here in the Punjab, in the more remote villages, if a stranger appears, who is obviously an educated man, and particularly if he be a European, the ailing folk of the village will come to him to recite their troubles and to ask for remedies. They do not ask if he be a doctor, but take it for granted that, being a man of education, he understands these matters. Quinine, castor oil, aspirin, boric acid, vaseline, and soap and water, these are the chief items in the missionary pharmacopoeia, and far be it from us to say that they do not do much good with them.

But this conception of medical aid given by missionaries hardly comes into line with our definition, that it is a chief accessory means of evangelization. To rise to this ideal demands a more extensive preparation of the paraphernalia of modern medical treatment, and above all the dedication of trained persons specifically to this work. The practice of modern medicine demands long and severe preparation from those who engage in it; it calls for the services of trained nurses and it requires a very considerable outlay of money. A good hospital is a beautiful thing. It is one of the most worth-while developments of modern civilization. In it are worked marvels for the relief of suffering and the comfort and prolongation of life. But only those who conduct the hospitals know at what a cost of money and labor and devotedness these are. Perhaps some would like to examine into the reasons for the undertaking by the Church of this line of work at all. In the first place, the care of the sick has, from the example and teaching of Christ, always been esteemed and practised as one of the great works of mercy. It is one of those selected by Our Lord for special mention when He will commend the just for their good deeds on the day of judgment: "I was sick and ye visited Me." The great Mother of Mankind could not but be solicitious to comfort and relieve everywhere, by means of her most devoted children, those whom disease has stricken. The command of Christ to His apostles to heal the sick, at the same time that He bade them preach the Gospel, is sometimes quoted in this regard, but it would seem that this related rather to miraculous healing by the

* No July number being published, the article had to be delayed.

"They passed by"

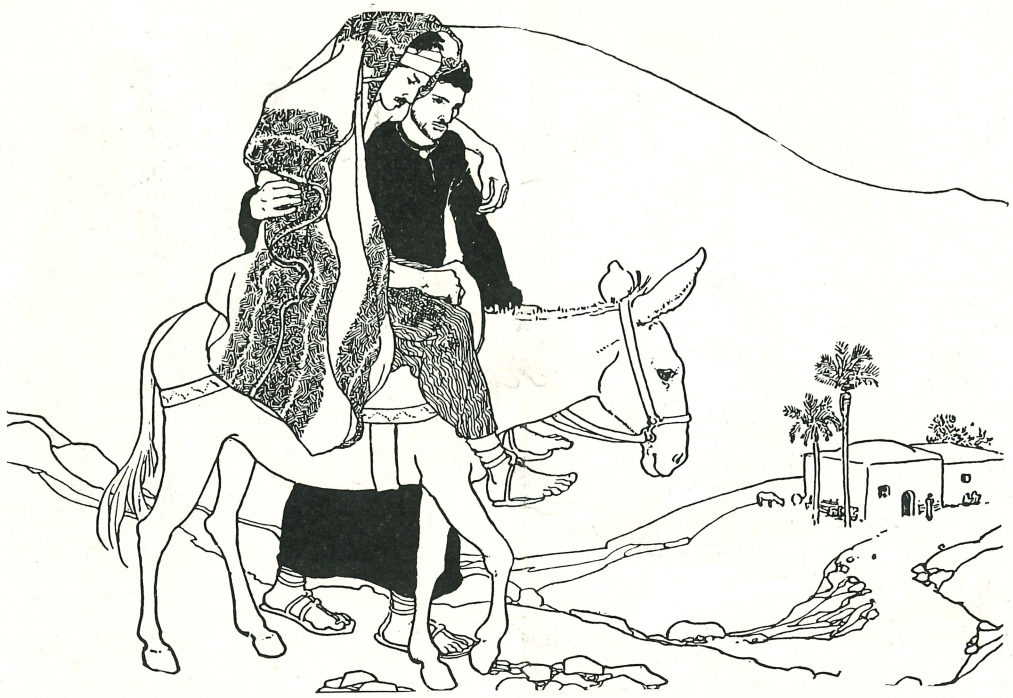
special gift which was common in the early Church, rather than to the employment of natural means to this end.

The second reason is that to the unbeliever the beauty, truth, and divinity of the Catholic Church is more easily and clearly manifested by concrete examples of mercy and self-sacrifice exhibited in her members than by statements of doctrine which are beyond his comprehension, or, worse still, of little interest to him. A patient who comes daily to a dispensary or lies ill some considerable time in the hospital has certain impressions engraved upon his consciousness which no amount of nationalistic or religious prejudice can nullify. To mention an analogous experience at home: the man has been nursed through a long illness in a Sister's hospital has never again a receptive mind for tales of the Maria Monk variety. The medical mission is a working model, a laboratory demonstration of what Christianity is.

In addition to the indirect influence exerted by kindness and the example of a Catholic life, there is very often an opportunity for speaking to the sick and dying of the Christian truths, of disposing them for the sacraments, or at any rate for preparing them to die in the proper dispositions. And then there is the greatest service of all which the medical missionary has the opportunity of giving, that of baptising dying infants. In every center there is opportunity for this, and in some districts in the year thousands of such cases present themselves.

There is one class of persons to whom medical missions are very nearly an essential for the penetration of the message of Christianity. There are what are sometimes called "the women of the exotic countries"; that is, the women in certain eastern countries, and more especially Mohammedan women, who live their lives in seclusion. The vast majority of these are illiterate, and being rigidly sequestered from the world, there is absolutely no opportunity for them to get into contact with the preaching of the gospel in the ordinary way. But the mission doctor, if the doctor be a woman, finds no door shut, no place where she may not go and be welcomed and spread abroad a good impression of Christian teaching and practice.

It would be very interesting to set down the present status of Catholic medical missions, but to do this adequately and fairly is well-nigh impossible. There are various publications in different languages upon the subject, but there is as yet no central clearing house for information upon Catholic medical missions. Some of the medical work done in mission countries is upon a very informal basis. Sometimes, rather often I think, it amounts to this, that a little group of Sisters goes forth into the villages, carrying a box of simple and safe drugs. Upon their appearance the people crowd about telling their troubles. Castor oil, epsom salts, and potassium permanganate are given out pretty freely, quinine and aspirin (for these are expensive when you begin to dispense to half a village) less liberally. A kind word is said to anyone who comes along, and a sharp lookout is kept for weakly or dying infants and children who may be entitled to baptism. These fortunate ones are given the sacrament on the spot, and the little expedition moves



"And setting him upon his own beast brought him to an inn, and took care of him"

on to the next place. This is the exercise of true Christian charity according to the means at hand, but let us not flatter ourselves, or convey the impression to others that these people are receiving anything worthy of the name of medical treatment.

Please do not think that this recital is meant as a destructive criticism of such methods. It is, in certain districts, with the personnel at hand, with the funds available and above all with the level of education of the population, the best that can be done. I should know, for I have very often done just this thing in villages and knew nothing better to do under the circumstances. What doth it profit to have an M.D. to one's name, and a perfectly good hospital, with good nursing and facilities for operating, reasonably close at hand, if the patient and the patient's relatives, to the fourth degree of kindred, are unanimous to the effect that there is to be no operation and no removal to hospital, but that a medicine is to be supplied which will at once, or at least within a week, make well the ruptured appendix or cure typhoid fever or pulmonary tuberculosis?

To return to the question of statistics of present-day Catholic medical missions. The unsatisfactoriness of the data at hand may be gathered from the example of India. The official Catholic Directory for India, Burma, and Ceylon, on being examined, diocese by diocese, presents (for India and Ceylon) 42 statements that there are, in the areas under consideration, hospitals or dispensaries. Of the 42 statements, only 9 indicate the number of beds or the attendance of patients. Of the medical institutions mentioned in these 42 statements, at least 8 are Government or other secular institutions in which Catholic Sisters are merely employes, usually with restrictive conditions laid down as to speaking of religion to the patients.

So you see it is hard to come at precise figures regarding Catholic medical missions. But of one thing I am sure, as a result of traveling about India a fair amount and of talking with many people on the subject, the impression one gets on reading these lists of hospitals and dispensaries is better than the reality warrants. Medical supervision is entirely lacking in some, the services of trained nurses (according to our ideas of training of nurses) in many, and adequate equipment in all.

Though the present development of Catholic medical missions is far from satisfactory and is many leagues behind what the Protestants have done in the same line, still we can rejoice in the thought that there are very definite and solid efforts well launched in various places to remedy the condition.

The first of the centers for recruiting trained personnel for medical missions is that established by Monsignor Becker in Würzburg, not yet 10 years old. It has already sent more than 20 doctors to the missions, after assisting them in securing the proper professional education and spiritual training. This Institute recruits both men and women doctors.

The second is the Society of Catholic Medical Missionaries, with headquarters in Washington, D. C. This Society is composed of women doctors, nurses, and other medical members and of non-medical members. Unlike those of the

(*Continued on page 7*)

THE SOCIETY AT HOME AND ABROAD

VISITORS AT THE MEDICAL MISSION HOUSE

Recently Rev. William White, a member of St. Joseph's Foreign Mission Society of Mill Hill, London, visited our motherhouse. Father White has been a missionary in the Prefecture Apostolic of Kashmir and Kafristan for the last 10 years. He often visits the Holy Family Hospital and knows our missionaries. We were very glad to get first-hand news of our Sisters and to hear that they are well and happy and that the work is progressing.

Rev. William White with a group of Medical Missionaries

Father White gave an interesting account of mission life to a group of ladies of our Washington Auxiliary. He impressed on them the significance and importance of medical missions. Since his return to England, we have received a small volume of spiritual poems, entitled "Lone Moments," written by him. The booklet can be had at 50 cents a copy. The proceeds will go to his mission. It may be ordered through us. We recommend it; every poem is a spiritual tonic.

We also had the honor of a visit from Rev. Mother M. Katherine Drexel, foundress of the Sisters of the Blessed Sacrament, Mother M. Josephine and Sister M. Paula. It was a real inspiration to hear from Rev. Mother Katherine's lips the account of the beginnings of the Order. The seed has grown to a big tree already bearing so much fruit for the American Negroes and Indians. Rev. Mother kindly agreed to a contract of prayer between her community and ours.

The campus of the Catholic University is teeming with Sisters from the four corners of the United States, gathered at the summer school to imbibe more and more knowledge to be able to give their best to the Catholic youth of the country. When one thinks of the strenuous work of the Sisters during the school year, it is really heroic to spend six weeks of the summer holidays in a sub-tropical city like Washington.

Over the week ends Sisters stroll up to our house. Some are old friends, others have heard of us but have never seen us. We would like to welcome all the Sisters who come to Washington; we always consider it a privilege to hear of their work and their interests and to have the opportunity of telling them of ours.

NEWS FROM OUR MISSIONARIES

Sister M. Christine writes from Rawalpindi: "I wish you could see our roses; they are wonderful. I do not mind the heat, but oh, these mosquitos and sandflies.

"We do not need to look for modifications. It reminds one of the story of the old woman who said that she would not mind hell, as she could not gnash her teeth there, having none. The preacher however told her that they would be provided. Well, mortifications in the shape of insects are being provided for us, and plenty of them. *Deo gratias.*"

Sister M. Helen writes from Dacca: "Rev. Father Lavery has come from Rawalpindi and has kindly offered to give us our annual retreat.

"Father is delighted with the Bengal missions. He said he wept for joy when he saw all the Christians at Mass at Toomiliah. It is wonderful how they all come to Mass on Sundays. The church is fairly large."

Addresses of Our Missionaries:

In the Punjab: The Holy Family Hospital, Murree Road, Rawalpindi, Punjab, India.

In Bengal: St. Michael's House, Segoon Baghan, Ramna Station, Dacca, Bengal, India.

Promote Medical Missions by subscribing to "The Medical Missionary." Subscripton $1 a year. Address, The Medical Missionary, Brookland, Washington, D. C. Telephone Decatur 3161.

ITEMS OF INTEREST

THE CATHOLIC HOSPITAL ASSOCIATION CONVENTION

St. Paul, Minn., was the scene of one of the finest gatherings ever held in that city when the Sixteenth Annual Convention of the Catholic Hospital Association met there last month. The Seventh Annual Convention of the International Catholic Federation of Nurses was held jointly with that of the Hospital Association.

More than sixteen hundred persons active in hospital work attended the sessions. Religious problems, medical social service, and higher standards of nursing education were discussed at the general meetings. The sectional meetings were occupied with problems concerning administration, record keeping, and diagnostic procedure.

The Rev. A. M. Schwitalla, S.J., of St. Louis, president of the Association, in his address at the opening of the convention, pointed out the necessity of formulating a new code of ethics, which while more general in character will, nevertheless, be specific enough to include all forms of malpractice, of carelessness, and of bad faith, which can hardly be included, when prohibitions or mandates are couched in terms that are too specific.

One could not but be impressed by the presence of so many hundreds of nursing Sisters, all keenly alive to the things that matter, striving to render the highest type of service, whose one thought is, "We are charged with a great mission of mercy and love; how can we best heal sick bodies and draw souls to the Kingdom of Christ."

THE CATHOLIC STUDENTS MISSION CRUSADE CONVENTION

Niagara University, picturesquely situated on the verdant banks of the Niagara River, was the scene this year of the Seventh National Convention of the Catholic Students' Mission Crusade. There where Nature is at its best was certainly a fitting site for the meeting of the hundreds of delegates representing a half million mission-minded students of all parts of the United States.

Apart from the general meetings and student forums special missionary forums were a distinctive feature of the convention, and these were absorbingly interesting. Countless opportunities were given the Crusaders to meet the veteran missionaries. Not to be overlooked were the artistic and instructive exhibits of the missionary communities, some of whom had native missionaries in attendance. Others in tropical garb gave a realistic touch to the surroundings.

May the enthusiasm and zeal displayed by the Crusaders there near the rushing torrent of the Niagara Falls continue and increase so that the rushing waters of our Faith may flow over all outside the fold of Christ and that the unsurpassable motto of the Crusade may soon be realized "The Sacred Heart for the world, the world for the Sacred Heart."

A meeting of the Committee of *les Etats Généraux* of feminism was held on the 16th and 17th of May at the Colonial Exhibition in Paris. The subject of the discussion was, "Women in the Colonies." A questionnaire was sent to many colonial organizations.

The questionnaire asked information about:

(1) Organizations promoting health and welfare in the Colonies.

(2) Legal and moral conditions of the woman and child.

(3) Economic situation of the women in the Colonies.

MEDICAL MISSIONARIES

(Continued from page 5)

Würzburg Institute, the members of this Society live in community, in the manner of religious. Established in 1925, there are already two mission foundations in India, the Holy Family Hospital in Rawalpindi and St. Michael's House, where members carry on the work of health visiting, including maternity and child welfare work in Dacca.

Slightly junior to this is the Institutum Deiparae, with headquarters in Glasgow, Scotland. It, too, is a center for recruiting trained medical women, who form a religious body. It has already opened one medical mission in Southern Rhodesia.

Nor is this all. In France there is a new institute for supplying trained nurses to work in the French possessions in Africa. In Belgium and in the Netherlands there are important Associations for the study and the practical furtherance of medical missions. In our own United States we have the Medical Mission Board to promote, by propaganda, by collecting money and by gathering medical supplies of all sorts, medical missions in all parts of the world. Efforts are being made in every country, that send many missionaries to the field, to provide these missionaries with such instruction and supplies as will be most useful to them and their charges.

To sum up for a conclusion. The field of medical missions is a tremendous one. It is of extreme importance for the spread of the Faith that this field be cultivated. Up to the present century, although Christian charity, with great devotion and at the cost of many sacrifices, has from the beginning met the needs of the suffering in the best manner it could with the means at hand, nevertheless Catholic medical missions are nowhere near the standard required by modern medicine for the care of the sick. They are also nowhere near the standard of efficiency achieved by Protestants in the same field. There are good and hopeful beginnings in many places. The whole cause of medical missions needs the charity of your prayers, as a matter touching most intimately the salvation of souls in the whole world.

SOME NOTES ON MOUNTAIN CLIMBING IN KASHMIR

By JOANNA LYONS, *M. D.*

VIRGIL made one mistake; it was when he wrote that bit beginning, "Facilis descensus Averno," and going on to say how much easier it is to get down than to get up. But he is all wrong. I do not know how this idea of it being easier to get down than to get up got around,

On the way to patients on the Kashmir hills

but people believe it. Perhaps it is because, while many people climbing up mountains have become discouraged and quit, it is nowhere recorded that anyone coming down ever got so discouraged that he stayed where he was or went back up. Being once up, you are in the position of the man who hugged the bear and found he could not let go—you must go through with it.

Snakes should be abolished or regulated. Suppose I am in a bare and steep place and see a good bush to take hold of to help me proceed on my journey. And suppose when I have this all planned out, a snake walks out and goes under the bush. What to do? "But," you will say, "is there not bush enough for both?" No; let us be fair. The snake saw the bush first; it is *his* bush; let him have it. I will not force myself upon him.

Do not clutch thistles; it is a proceeding that has little to recommend itself.

Loose stones interfere with one's morale. You put your foot on one that looks solid and away it goes leaping and bounding down the crevasse. You say to yourself, like the saint who saw the man led to execution: "There, but for the grace of God, go I."

YOU HAVE TWO CHANCES

You have two chances,
One of getting the germ
And one of not.

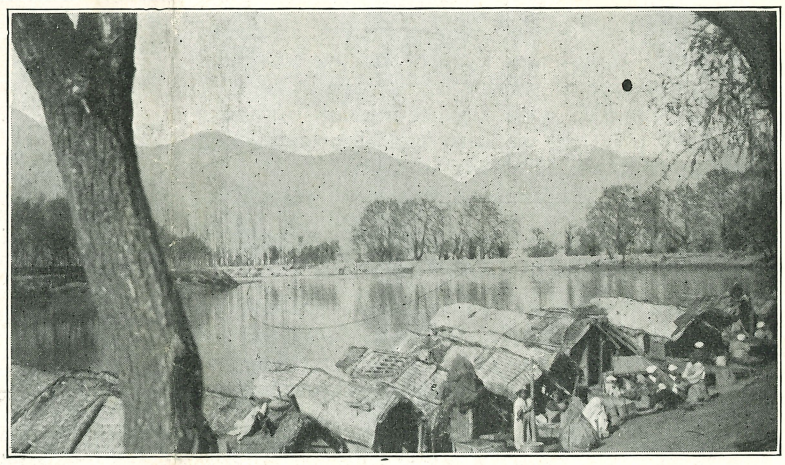
And if you get the germ,
You have two chances,
One of getting the disease
And one of not.

And if you get the disease,
You have two chances,
One of dying
And one of not.

And if you die—
Well, you still have two chances.

(*Monthly Bulletin of Indiana State Board of Health*)

Promote Medical Missions by subscribing to The Medical Missionary. Address Catholic Medical Mission House, Brookland, Washington, D. C., U. S. A. Subscription, $1 a year. Telephone, Decatur 3161.



River scene in Kashmir

Cardinal Van Rossum writes:

"While opening the Missionary Exposition in 1925, His Holiness Pope Pius XI said: 'The great impulse to action always comes from the region of ideas.'

"The faithful must understand the great honor which Divine Providence has bestowed on them in letting them assist a work which is divine in its origin and essence. They need to be convinced that it is of eternal profit to them to labor in union with Christ, Whom the missionaries represent, for the increase of God's glory and the spread of the Reign of Jesus."—*The Far East.*